## CUSTOMER USAGE INFORMATION AUTHORIZATION (Non-Residential)

I hereby authorize my electric utility to act in my behalf for the purpose of obtaining information about my historical energy usage and billing information and consent to the release of same so that the Company named herein may evaluate my energy usage patterns and make me an offer to supply energy. The utility considers all customer usage information to be confidential.

This authorization in no way binds me to the purchase of any service or product from the Company named herein and is to be used for the sole purpose of determining my offer price of electricity service or the provision of other energy-related services.

/I P ! I I	representing	(Company)
(Individual)		(Company)
Address		
Email Address	Phone Num	oer ( )
Type of Data Requested (select one):		
Sixty (60) minute interval data	(if available) provided in A	SCII text file
Monthly billing information (will	I be provided if 60 minute	interval data is unavailable)
NOTE: Billing information will	typically cover the m	ost recent twelve-month period.
Company Information (plea	ase print):	
My Utility		
Company Name		
Address		
City		State Zip
Business Contact Name		Telephone Number ( )
Party other than customer to be Billed, if	allowed by your utility: _	
Business Representative's Signature		Date
This authorization is valid for I wish to have this authorize	or 90 days from the above ation valid until	e date, unless otherwise indicated. (date & initial).
20 Digit Customer	Number(s) (As sh	nown on Page 3 of Latest Bill)
<del>-</del>		_

PLEASE FAX THIS AUTHORIZATION

Conectiv Power Delivery XXX-YYY-ZZZZ PSEG XXX-YYY-ZZZZ

FirstEnergy 330-315-8664 (attn: Supplier Services)

Rockland Electric XXX-YYY-ZZZZ

Each utility has specific rules for releasing information, and this service may be subject to a charge by the utility.